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## TRANSMITTAL FORM

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LA∕HIVE & COCKFI∄LD∫LLP

Debra J. Milasincic, Esq.

April 23, 2007

Application Number 10/614,333 - Conf. #5952

Filing Date July 3, 2003

First Named Inventor R. Rogers YOCUM

Art Unit 1652

Examiner Name C. L. Fronda

Attorney Docket Number ROLAFAR

Total Number of Pages in This Submission **BGI-154B** ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) to TC Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC x Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information **Provisional Application** Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address X Otner Line. (1) Identify below): Other Enclosure(s) (please x Extension of Time Request Terminal Disclaimer PTO form SB/08 **Express Abandonment Request** Request for Refund Copies of fifteen (15) references Return Receipt Postcard x Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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PTO/SB/17 (02-07)

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no person are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995 Complete if Known Effective on 12/08/2004. 10/614,333 - Conf. #5952 Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL Filing Date July 3, 2003 R. Rogers YOCUM First Named Inventor For FY 2007 **Examiner Name** C. L. Fronda Applicant claims small entity status. See 37 CFR 1.27 1652 **Art Unit** TOTAL AMOUNT OF PAYMENT **BGI-154B** (\$) 1,020.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name Lahive & Cockfield, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 **Provisional** 200 100 0 n 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee Paid (\$) **Multiple Dependent Claims** 17 Fee Paid (\$) Fee.(\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets Extra Sheets** Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) /50 (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g. late filing surcharge): 1253 Extension for response within third month 1,020.00 SUBMITTED BY

Express Mail Label No. EV 9564737	709 US Dated:	April 23, 2007

Signature

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